MARKETING & BRANDING PLAN

ABSTRACT

This marketing and branding plan describes the health district's method of organizing public health messaging to increase awareness, healthy years of life and quality of life, while evaluating the success of the marketing initiatives. It also includes the details on the agency's branding methods.

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Signature and Revision Page

This Plan has been approved and adopted by the Health District:

_____   _____
Health Commissioner   Date

![Public Health Greene County logo]	**Greene County Public Health**	X _(signature)_ Board President	
		DC #:	PLA-01-ADM-1001-2015-4-MP
		Adoption Date:	10/01/2015
		Last Update:	09/10/2015
Revision #:	Brief Summary of Changes	Revision Date:	Last Modified by:
1.2	Draft	01/10/14	L. Fox
1.3	Annual update	08/14/15	L. Fox
1.3	Pending Approval	09/10/15	M. Branum
1.3	Approval, email and web address	10/01/15	M. Branum

Revision #:	Brief Summary of Changes	Revision Date:	Last Modified by:
		06/13/2022	M. Howell
		06/17/2022	L. Fox
		9/20/2022	L. Fox
	Added SOGs and additional edits to align with PHAB standards	9/28/2023	L. Fox
	Added resource for effective campaign planning	2/27/2024	L. Fox

Table of Contents

Greene County Public Health strives to disseminate information accurately, timely and appropriately to the public. This Marketing and Branding Plan serves as the foundation of this commitment.

For questions about this plan, please contact:

Public Information Officer (PIO)
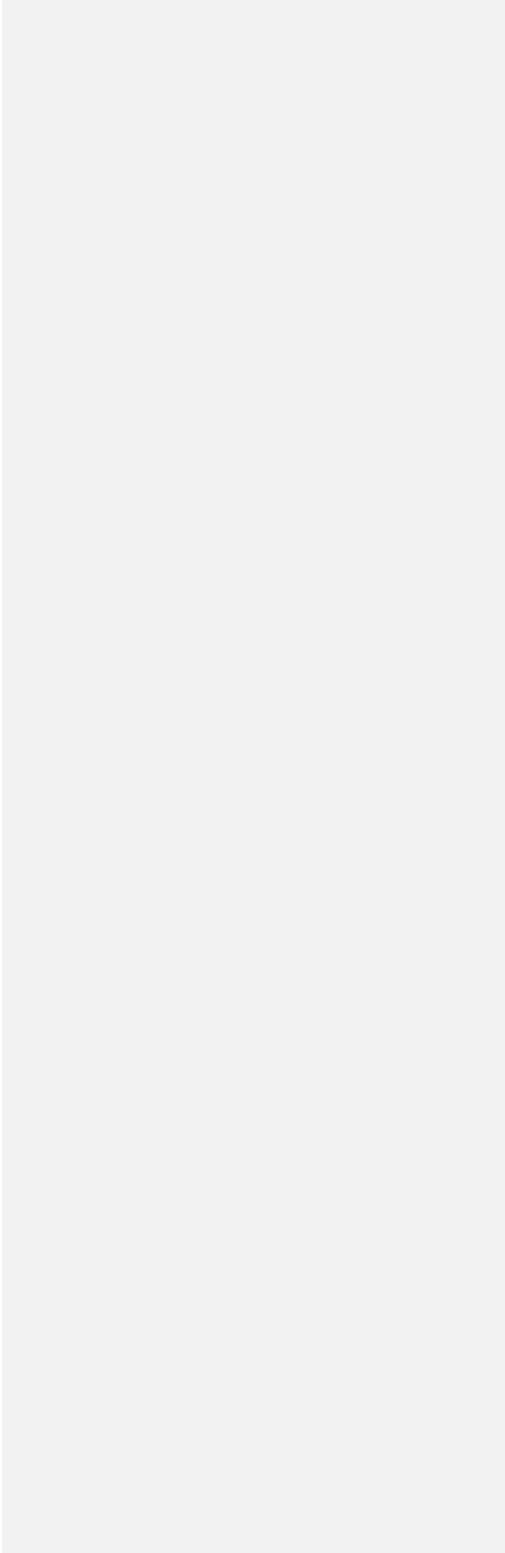**Phone: (937) 374-5669 office / (937) 283-5178 cell**

This plan is integral to the implementation of our strategic plan and our community health improvement plan. For additional information on these plans, please contact:
The PIO, the Director of Planning, Preparedness & Promotion, Accreditation Coordinator, or Deputy Health Commissioner.

I. *Introduction*

Executive Summary	Greene County Public Health's Marketing and Branding Plan is derived from the overall agency mission, vision, and guiding principles. The Marketing and Branding Plan was generated from public information positioned under the office of Planning, Preparedness and Promotion. The plan is approved by the Coordination Team and will be reviewed and revised as needed at least every two years by the PIO and the Director of Planning, Preparedness and Promotion. The Marketing and Branding Plan outlines a planned approach for health promotion, including the goals, objectives, and a strategic planning format for marketing and branding. The plan aligns with the CLAS Standards and Strategic Plan. The Marketing and Branding Plan will also include guidelines to follow when using public health's name and logo on written and electronic materials. The plan will be shared with all employees and key stakeholders.

Strategic Plan Key Elements
 	
 GCPH Strategic Plan 2022-2024
	Vision
	 Our vision is to be the trusted and recognized leader in public health emergencies, an advocate for the advancement of health equity, and a provider of programs and services that uphold standards of public health practice.
	
	 Mission Statement
	 Our mission is to prevent and control communicable diseases, promote the health and wellness of all Greene County residents, and protect the quality of our environment.
	
	 Scope of Service
	 Our employees accomplish our mission through integrated community efforts, assessment, health education, collaboration and assurance of quality services, disease prevention and control, and emergency preparedness.
	
	 Values
	 We put these values into practice with our individual and organizational behavior:
	 • Service – We strive to provide exceptional service with professionalism and respect for all.
	 • Collaboration – We develop, nurture, and leverage key community partnerships.
	 • Quality – We utilize evidence-based best practices and performance management to maintain and improve program efficiency and effectiveness.
	
	 Strategic Priorities:
	
	 1. *Workforce Development*
	     a. Advance the knowledge, skills, and abilities of the public health workforce to ensure all decisions are based on data-driven best practices by 2026.
	     b. Expand current support of employee recognition, communication among team members, and team building by 2026.

	2. *Information Technology*
	    a. Foster an organizational IT environment that is flexible and adaptable to emerging threats to ensure public health readiness by 2026.
	    b. Continue to implement innovative strategies and workforce education.
	
	3. *Communication*
	    a. Continue to develop and implement risk and proactive health communication in a timely and accurate manner.
	    b. Reduce misconceptions and misinformation and ensure communication is accessible to all audiences by 2026.
	
	4. *Health Equity*
	    a. Strengthen education and community engagement practices that promote health equity specifically related to age, gender and income disparities.
	    b. Work collaboratively across the department and the community to build support for and foster a shared understanding of the critical importance of equity to achieve community health and well-being by 2026.
	
	5. *Maternal Child Health*
	    a. Identify, educate, and promote health and development for Greene County children during prenatal to age three by 2026.

II. *Purpose and Goals*

Purpose	The purpose of the Marketing and Branding Plan is to outline a strategic method used by public health in which principles of planning, implementing, and evaluating marketing campaigns are considered to meet the needs of the community. Public health's strategy for sharing information with the public includes using local media broadcasts, public meetings, direct mail, social media, and advertisements of all types. All of these are critical to building our brand recognition with the public. Prevention, promotion, and protection are the key outcomes for public health, thus making the development of effective marketing and branding strategies a critical objective for the field.
Goals	**Goals of the Marketing and Branding Plan include:** • Assure broad community awareness. • Maintain ongoing relations with local and statewide media including the ability to write a press release, conduct a press conference, and use electronic communication tools to interact with the media. • Effectively use social media to communicate directly with community members. • Appropriately tailor communications and communication mechanisms for various audiences • Write and implement a routine communications plan/policy and develop routine public health communications including reaching communities not traditionally reached through traditional means of advertising. • Develop and implement a risk communication strategy for communicating with the public during a public health crisis or emergency. This includes the ability to provide accurate and timely information and to address misconceptions and misinformation, and to assure information is accessible to and appropriate for all audiences. • Transmit and receive routine communications to and from the public in an appropriate, timely, and accurate manner, on a 24/7 basis. • Develop and implement a proactive health education/health communication strategy (distinct from risk communication) that disseminates timely and accurate information to the public designed to encourage actions to promote health in culturally and linguistically appropriate formats for the various communities served, including using electronic communication tools. • Assure accurate and timely information is presented through branding, marketing, digital technology, radio, television, social media, and other public relations strategies. • Develop, strengthen, and maintain strategic public and private partnerships (including local media) that improve community health.

	• Use data from the Community Health Assessment and other resources to assist in decision making for campaigns.
	• Develop marketing strategies that communicate the GCPH brand to targeted groups based on data collection.
	• Promote the use of evidence-based strategies. GCPH implements evidence-based prevention practices in programming to increase the health outcomes of residents. This in turn leads to creating communication that works to promote these practices and ensure they are tailored to a variety of audiences. Resources used to identify evidence-based practices are:
	    • **http://www.thecommunityguide.org/**
	    • **http://healthypeople.gov/2020/implement/EBR.aspx**
	• Develop marketing strategies that address the priorities outlined in the Community Health Improvement Plan (CHIP).
	• Assure that all public information meets Culturally and Linguistically Appropriate Services (CLAS) standards as outlined in agency policy.
	• Provide training for Public Health employees who will be designated spokespersons.

Outcomes	The Marketing and Branding Plan will be carried out by using a strategic planning process. The following primary outcomes should be considered for any marketing campaign: • The promotional campaign should reach the intended targeted audience through specialty components such as the internet, billboards, radio, television, or targeted advertising. • The message is understood by the audience. • The campaign stimulates the recipients to act for change. • The campaign meets CLAS standards. • The evaluative process measures the effectiveness of the campaign.

Links to Other Agency Plans and Policies	The Marketing and Branding Plan is designed to establish a strategic process for information dissemination and will follow the guiding principles and strategic directions outlined in the Strategic Plan 2022-2024. All information dissemination will be guided by Public Health Accreditation Board (PHAB) standards, and the Culturally and Linguistically Appropriate Services Policy (CLAS). This will ensure that public information is comprehensively inclusive of both health literacy and cultural competence. This will include cultural respect regarding behaviors, language, customs, beliefs, and perspectives. All employees must follow the Standard Operating Guideline for Approval of Marketing / Advertising Efforts involving billboards, print, radio, TV, internet, and social media. All employees must also follow the Written Procedure for Approval of Printed Materials for the Public; Working with the Area News Media; and the Social Media Policy.

III. Public Information Program

Introduction	The PIO is responsible for the overall development, monitoring, and maintenance of all public health information available for public consumption. The PIO coordinates all marketing and advertising campaigns and develops / reviews all agency branding strategies. The PIO coordinates and supervises the overall public information activities for the agency into a planned unified approach. The PIO is responsible for all news releases, press conferences, and briefing sessions. The PIO establishes and maintains effective working relationships with representatives of printed and electronic media and oversees public relations activities including the agency's websites. **The PIO must review and approve any information, before publishing / distribution, that is made available to the public, utilizing the CLAS standards checklist.**

Commented [SW1]: Is this section highlighted because it needs editing to align with GCPH SOG's or do we have these SOG's already written?

Commented [LF2R1]: The SOG is already written, but this is copied from PHDMC's stuff and may not align with our SOG numbers….needs reviewed.

Commented [LF3R1]: Maybe that's what we need as opposed to a "policy", but a SOG for communications…. And it looks like they are separate for PHDMC….

Commented [LF4R1]: So I see 3 separate SOGs here that we don't have...and I don't know that any of ours are numbered like PHDMCs are….

Commented [5R1]: SOG or SOP is more appropriate for these types of things. Not sure if we have nomenclature, but naming it in accordance with how it is in the plan as an attachment number or letter or whatever...as long as it leads the reader to the right place.

Commented [LF6R1]: @Sheryl Wynn do I need to get approval from anyone other than you to begin doing SOG's to match this highlighted area?

Commented [SW7R1]: No, this area is under my authority. It will be presented to Coordination, and I can discuss why we are recommending adding SOGS and editing the policy. I will address question and bring back any comments, concerns or other recommendations. We are striving to align with PHAB standards - and to continuously improve all plans, policies and practices. It is an ongoing process.

Commented [SW8]: Here may be a place to add Review" and mention/ link the checklist for CLAS that you are working on.

Commented [LF9R8]: @Sheryl Wynn it will be linked when the doc is complete.

Program Structure	**The PIO** provides information to citizens regarding the various programs and services offered by public health and other community partners to assist with other needs. Any individual may contact GCPH (at 937-374-5600) to be linked with appropriate community resources and/or to find out additional details about our services. Our website includes information about public health services and can be translated into 58 different languages. Public health contracts with the United Way of Greater Dayton HelpLink 211 information and referral line, to answer phone lines after working hours and on weekends. All emergency calls are linked to on call staff after hours as appropriate or messages are relayed for follow-up when indicated. **Communication outreach is provided by select employees to** disseminate information to the public through health fairs, faith-based events, community events, and educational presentations. Communication outreach shares information about the many programs and services of public health and offers additional educational and referral information. The community can request the agency's participation through the website, here. **The Speakers Bureau** provides a listing of the various health topics and services available for community presentation on the agency's website, here. When speakers are requested, the PIO will reach out to the subject matter expert to inquire about availability and respond appropriately to the requestor.

Program Responsibilities & Procedures	**Website –** The PIO is responsible for assisting the Chief Information and Technology Officer (CITO) with the development and maintenance of the public health website at www.gcph.info and any other websites that may be developed for public health purposes. Information posted on the public health website may include services offered by public health, public awareness information, resources, news, and contact information. Services and program information can be downloaded from the website. Maintenance includes a review of material placed on the website. The PIO and CITO work closely with the directors and supervisors to ensure posted information is up to date. **All information posted on the website must be approved by directors / supervisors and the PIO.** **Written Information –** The PIO is involved with the development and dissemination of all marketing materials, including items such as: the annual report, power point presentations, program specific brochures, flyers, and posters. Many of these items are available on the website for download and paper copies are available for pickup or through the mail. These materials are also distributed at community outreach events, health fairs, and educational presentations. Program managers, directors, and other pertinent employees coordinate with community partners and the target population in the development of culturally appropriate, targeted, and unified health messages to be shared with the public and the community at large. The PIO will review all press releases, promotional materials, and other public information with the appropriate team members for accuracy and timeliness.

| | **Social Media –** The PIO creates and maintains social media sites for public health. **No social media site will be created for GCPH without permission from the PIO, CITO, and the Health Commissioner.** All social media policy guidelines must be followed. The PIO/Backup/Assigned Backup will coordinate with all team members to share accurate and timely information on the agency's social media platforms and website.

Dissemination of Public Health Emergency Information – The PIO is directly involved in all public health emergencies. The PIO is immediately notified of any situation that may pose a public health emergency or threat. The Public Information and Warning Plan will be followed.

Media Engagement
1. The PIO/Backup/Assigned Backup is the only one to be contacting the local media for coverage of any event, program, or news story unless otherwise instructed.
2. All calls or emails that come to the agency from a member of the media are to be forwarded to the PIO/Backup/Assigned Backup.
3. The PIO/Backup/Assigned Backup helps the rest of the team if media coverage is needed for a program or event.
4. Misinformation in the local media or on social media will be addressed and corrected by the PIO and the Planning, Promotion and Preparedness Director as needed. The Error Correction Policy should be followed. |

IV. Approach for Communication & Marketing

Introduction	Public information is a multidisciplinary area of public health practice which seeks to create, communicate, and deliver health information and interventions using evidence-based strategies. By incorporating foundational theories and strategies from health communication, social marketing, and health promotion into the Marketing and Branding Plan, this agency has developed a planned approach (see References and Resources on page 20 – Public Health Foundation's "Planning Before You Communicate" tool) which provides strategic guidance for designing health interventions, campaigns, and communications. By implementing this tool, it ensures that we are creating messaging through multiple methods and to a variety of audiences. The scope of the planned approach for health communication and marketing contributes to all aspects of disease prevention and health promotion.

Steps for a Marketing Campaign	Following a framework which incorporates health communication and marketing strategies can increase the likelihood of a successful public health promotion campaign. The use of the Public Health Foundation's "Planning Before You Communicate Tool" will provide guidance (see References and Resources on page 20). Preparation and planning are needed to ensure that the goals and objectives in the Marketing and Branding Plan are fulfilled. When advertising is a result of a grant that requires a marketing plan, we will use the format of the grantor's plan. When a grantor does not have a plan, the following steps shall be used as a guideline for all health communication, marketing, and branding strategies:
	
	1. **Select the Target Audience**
	   a. Decide who to reach with the message. (Consider such things as age, income level, marital status, occupation, educational level, gender, personality traits, language, and ethnic background.)
	   b. Identify geographical areas that have the greatest need.
	   c. Identify the target audience (public, clients, adults aged 18-30, etc.)
	
	2. **Develop a Goal and Purpose**
	   a. What does the campaign or project want to achieve? (The goal should be specific and actionable to guide the action plan.)
	
	3. **Assess the Need by Using Current Data and Research**
	   a. Gather information to assist in identifying targeted audiences and geographical areas. This will help develop target messages that incorporate specific language and cultural influence that will resonate positively with specific audiences.
	   b. Consider previous campaign efforts and current campaign efforts to determine impact.
	
	4. **Develop Goals and Objectives Using the SMARTIE Framework**
	   a. **Specific** - Who, what, when, where, why, and how.
	   b. **Measurable** - Include a numeric or descriptive measurement.
	   c. **Achievable** - Consider the resources needed and set a realistic goal.

	d. **Realistic** - Make sure the goal is consistent with the mission.
	     e. **Time-bound** - Set a realistic deadline.
	     f. **Inclusive** – It brings traditionally marginalized people – particularly those most impacted – into processes, activities, and decision/policy making in a way that shares power.
	     g. **Equitable** – Includes an element of fairness or justice that seeks to address systemic injustice, inequality, or oppression.
	
	5. **Define Evaluative Tools**
	     a. Consider both qualitative and quantitative methods.
	
	6. **Define Strategies**
	     a. Define a plan of action that includes responsible individuals and the engagement of stakeholders in the process.
	
	7. **Implement the Plan**
	     a. Plan how the information will be disseminated and take advantage of unexpected opportunities through media launches, if appropriate.
	     b. Plan for and attempt to defuse potential threats to your efforts.
	
	8. **Evaluate Goals and Objectives**
	     a. Evaluate your plan and make any revisions as needed.
	
	9. All marketing campaigns must be reviewed and approved by the PIO. After the plan is submitted, the PIO will consult with the program supervisor. The proposed plan may then be approved and implemented.

Commented [LF20]: @Sheryl Wynn changed this to "program supervisor"

Definitions	**Health communication -** Informing, influencing, and motivating individual, institutional, and public audiences about important health or public health issues. Health communication includes disease prevention, health promotion, health care policy, and the business of health care, as well as enhancement of the quality of life and health of individuals within a community. Health communication deals with how information is perceived, combined, and used to make decisions. **Health marketing -** Involves creating, communicating, and delivering health information and interventions using customer-centered and science-based strategies to protect and promote the health of diverse populations (CDC, 2005). It is a multidisciplinary practice that promotes the use of marketing research to educate, motivate, and inform the public on health messages; an integration of the traditional marketing field with public health research, theory, and practice; a complex framework that provides guidance for designing health interventions, campaigns, communications, and research projects; a broad range of strategies and techniques that can be used to create synergy among public health research, communication messages, and health behaviors. **Health promotion -** A set of intervention strategies that seek to eliminate or

	reduce exposures to harmful factors by modifying human behaviors. Any combination of health education and related organization, political, and economic interventions designed to facilitate behavioral and environmental adaptations that will improve or protect health. This process enables individuals and communities to control and improve their own health. Health promotion approaches provide opportunities for people to identify problems, develop solutions, and work in partnerships that build on existing skills and strengths. Health promotion consists of planned combinations of educational, political, regulatory, and organizational supports for actions and conditions of living conducive to the health of individuals, groups, or communities. Health promotion activities are any combinations of education and organizational, economic, and environmental support aimed at the stimulation of healthy behaviors individuals, groups, or communities. **Social marketing** - Represents a unique system for understanding who people are, what they desire, and then organizing the creation, delivery, and communication of products, services, and messages to meet their desires while at the same time meeting the needs of society and solve serious social problems.

V. *Media Evaluation Tools*

Introduction	Marketing and advertising campaigns should be evaluated for a degree of success. There are numerous tools that are available for determining the effectiveness of any campaign. Many of the tools can be used independently or collectively. Before a campaign begins, clear goals and objectives should be established. The objectives need to be measurable and use proper metrics to define success. At the completion of every time-limited campaign, a careful assessment will be conducted to inform future planning.
Various Tools	There are various tools that are helpful in assessing different components of any campaign: • **If the campaign involves purchasing** - diverse communication technologies of print, radio, television, and the internet, the PIO will work with the vendors to obtain information regarding the reach and frequency of all paid advertising. • **If the campaign involves local news programming -** it is easy to monitor expected broadcasts and record the clips from the media websites. • **If the campaign involves website monitoring -** the CITO can monitor and document the number of hits to the GCPH site or to specific pages. Navigation patterns can also be tracked to determine who has accessed the site and how long they stayed. • **If the campaign involves qualitative analysis -** those involved in the campaign, or monitoring the campaign, can provide an examination of the components that worked well, those that worked poorly, and their analysis of why. The process can also use focus groups, surveys, content analysis, and interviews.

Commented [SW21]: Spell check is flagging this...should it be "a degree" or degrees?

Commented [LF22R21]: degree....

VI. Branding of Public Health

Purpose	The purpose of branding agency programs and services using the Public Health logo is to ensure the public easily associates Public Health with the correct programs and services we provide. All services are not only identified by the internal program names but also with the Public Health logo. The Public Health Accreditation Board (PHAB) logo will also be used with the Public Health logo when appropriate. All employees using the Public Health logo or PHAB logo for printed material, email, or other electronic communication (including social media) must follow the guidelines outlined in this plan. Public Information will determine when it is appropriate to use other associated logos.
History of the Public Health Logo	Blue, white, and khaki are longstanding colors used in branding Public Health and health in general. In 1749, the first blue and yellow flag was flown to request help from the maritime health service. Blue uniforms have always been worn by public health nurses and the U.S. Public Health Service. These colors are associated with integrity, authority, and stability; they symbolize the legacy and steadfast qualities of Public Health and were chosen to represent Public Health as well. The three-pointed shield and stylized plus symbolizes prevention, promotion, and protection, the three goals of Public Health. These icons have universal recognition associated with Public Health. The tag line: "*Prevent. Promote. Protect*" embraces Public Health as both a sentinel and responder.
Source	Greene County Public Health has adopted the national Public Health logo developed by National Association of County and City Health Officials (NACCHO) to assist in branding Public Health agencies across the United States. GCPH follows the guidelines of use and formats developed by NACCHO.
Variations	

Preferred Variation	Vertical; Full color	
	The full color vertical version of the Public Health logo is the preferred use. Other versions such as horizontal or one color may be used on an as-needed basis. In most situations, GCPH will use the vertical or the horizontal logo depending upon the available space and the surrounding graphic material. The proportions of the images are to remain the same as the original artwork. No layout changes or formatting modifications to these logos are permitted. No stretching or distortion of the images is permitted.	

Protection Area	The protection area is defined as the open white space area around the logo. The logo is to be displayed prominently to keep it isolated from all other words, designs, photos, and graphics. The protection area maintained around the logo must never be less than the height of the "P" in the word "Public" within the logo. The protection area requirement applies to all four sides of the logo.
Minimum Size	The logo should be easily read by an individual with normal vision. We strongly suggest not using any version of the logo at a size smaller than 1" width but the basic rule for this situation is: "If it's too small to read, it's too small to print".

Colors	**No color modifications are permitted.**
	
	Pantone Matching System:
	   289, 465, white
	
	Four color process separation:
	   289 = 100% cyan / 64% magenta / 60% black
	   465 = 20% cyan / 32% magenta / 58% yellow
	
	Grayscale:
	   100% black for outer lining and typeface
	
	   38% black for the shield interior
	
	Black/White:
	   100% black for outer lining and typeface White for shield interior

Fonts	Bookman Old Style is the typeface of the logo. The logo graphics' size and position are designed to attain balance with the words' size and position. **Proportions and spatial relationships between characters should not be changed.**

Typeface Standards	When used carefully and consistently, typography can be a powerful tool in creating brand style. Times New Roman has been selected for most applications because it is modern, simple, and readable. In most documents, letters should always be typed in 12-point font, black on standard letterhead. 1" margins are used. Documents, plans, and letters will be single spaced. Business cards, social media outlets, and photo identification cards for staff will also utilize typography consistent with this plan. Heading 1 should be black text (or logo blue), 16 font and bold. Heading 2 should be black text (or logo tan), 12 pt. font (could be bolded for emphasis). Heading 3 should be black text and italicized. Paragraphs should not be indented in most documents. Special consideration for font use on flyers and other documents will be given on a case-by-case basis, depending on the document and its intended audience.
Formats	There are a variety of formats and file types available for the logo. Some formats include high resolution, transparent background (PNG), Scalable Vector Graphic (SVG), etc. **The PIO should be contacted to acquire the most appropriate format for the specific need.**
Obtaining Logo	Copies of the various logo format and file types are available through the PIO. Requestee should detail project in request note so the PIO can provide the best logo, format, style, and resolution for the specific project.
Unacceptable Logo Usage	The logo may not be condensed, skewed, distorted, or modified in any way. Colors, fonts, or elements of the logo shall not be changed. In rare instances when size / location will not accommodate the standard logo an alternative design may be used. **This may only be done with the authorization of the PIO.**
Internal Program Logos	The use of internal program logos should be kept to an absolute minimum. Whenever it is necessary to revise or create an internal program logo, the request must be submitted to the PIO. The PIO will consult with the director of Planning, Preparedness and Promotion and a decision will be made to approve or deny the request.
Use of Internal Program Logos with GCPH Logo	If the public health logo is used in addition to other agency logos, the GCPH logo will be portrayed as the most prominent logo. Reading in the United States is from left to right thus, the public health logo will usually be located on the far left, to be the first graphic element noticed. When the Public Health logo is used with other logos, the public health logo shall be of equal or larger size than the accompanying logos.

Abbreviations	On first reference in a document, the name shall read Greene County Public Health. It is acceptable to use the abbreviation GCPH in internal documents. All legal contracts and related documentation will refer to GCPH as Greene County Combined Health District, dba Greene County Public Health.
PHAB logo	As a PHAB-accredited health department, GCPH is entitled to use this in its internal and external communications and marketing materials. Consult with the PIO for applicable usages. Do not cut and paste from this document.
Letterhead	Programs must use the agency approved letterhead.
PowerPoint Presentations	PowerPoints should be created using the "16 x 9 aspect ratio." When a PowerPoint presentation is prepared for use with the public, it shall contain the GCPH logo and / or the "Greene County Public Health" name on all slides. Dates and page numbers on all slides are recommended but a date is only required on the title slide. As with all PowerPoint presentations prepared for public use, the PIO shall review and approve the presentation prior to its use in public settings. The review's purpose is not focused on changing content but on ensuring that the presentation maintains a professional appearance and that all public health information is used appropriately. In the end, the presenter is responsible for the accuracy and validity of the information presented. The PIO will review the presentation for branding, readability, and overall design.
Translation	Programs requesting PIO support must identify if and when a project needs to be translated into another language. **Please note that producing a document in multiple languages can significantly impact project completion time. Any associated fees with translation will be incurred by the program or grant.**

Cultural Diversity	GCPH's programs and services are provided to a diverse population on a non-discriminatory basis. As such, GCPH's informational, promotional, and advertising materials should reflect the diverse groups that make up Greene County and portray the services provided in a culturally appropriate manner. Visuals should be culturally relevant and sensitive. Images and symbols used should be familiar to the intended audience. When people are shown in the visuals, they should be of the same racial or ethnic group as the intended audience. Select images that are familiar and relatable to the audience. For materials designed for diverse audiences, show people from a variety of ethnic, racial, and age groups. Photographs may help certain audiences identify with the message. Materials, such as brochures, web pages, flyers, and posters, should be designed so that people can grasp the main idea and know who the material is speaking to just by looking at it. All materials should be checked against the Inclusive and Culturally Appropriate Materials Checklist and its companion document. It is acceptable and appropriate to use individual people on print pieces if the same type of person is not routinely used.
Readability	All written communication materials should be reviewed using the Centers for Disease and Control (CDC) and Prevention *Clear Communication Index (Index).* The Index provides a set of research-based criteria to develop and assess public communication products. The Index supports the efforts of the CDC to comply with the Plain Writing Act of 2010 and achieve goals set forth in the *National Action Plan to Improve Health Literacy* and the *CDC Action Plan to Improve Health Literacy.* The creator of the document should score its readability using the *Clear Communications Score Sheet.* Authors of written materials should refer to the CDC's *Everyday Words for Public Health Communication* to ensure documents meet these standards.

Commented [LF29]: @Sheryl Wynn added the links here….

Commented [LF30R29]: Took out the links and will re-add when all is finalized.

Commented [LF31]: @Sheryl Wynn this section needs reviewed...this is what PHDMC has in their plan….I could include the links if we want to keep it the same. Seems like these plans with our LHD counterparts should be similar in nature….do you agree?

Commented [SW32R31]: I agree, it gives us something concrete to assure that literacy is addressed. The next goal would assuring that we educate our people again on everything...this aligns with our health equity committees work and what we discussed...be considerate of language & literacy levels is are key parts of health equity.

Commented [SW33R31]: Once all edits are complete, please send me a link to the most up to date copy…. I am not seeing changes or edits that I believe have been made or that you indicated in the comments as having been made.
I think we are getting things lined up not only to meet PHAB standards, but to update and bring more clarity to the plans and processes to help improve operations...making things more clear, efficient and effective. Good work!!
Thanks

The Branding and Style guide is available:
http://www.naccho.org/advocacy/marketing/nationalidentity/upload/PH_Identity_Guide.pdf and has been incorporated as the guide for all uses of the logo including the parameters for color.

In summary, the agreed upon branding should be flexible to meet the emerging demands of the marketplace and the intended audience. The brand should remain consistent to allow for a fair and unbiased assessment of the effectiveness of a marketing campaign.

VII. References and Resources

Public Health Foundation – *Planning Before You Communicate Tool*
https://www.phf.org/resourcestools/Pages/Planning_Before_You_Communicate_Tool.aspx

Centers for Disease Control and Prevention, Online Newsroom.
http://www.cdc.gov/media/index.html

National Association of County and City Health Officials (NACCHO).
http://archived.naccho.org/

Resnick, E. and Siegel, M. *Marketing Public Health,* (2013). Jones and Bartlett.
CDCynergy. https://samples.jbpub.com/9781449683856/frontmatter.pdf

National Cancer Institute. *Making Health Communication Programs Work (Pink Book)*
http://www.cancer.gov/publications/health-communication/pink-book.pdf

Centers for Disease Control and Prevention *The CDC Clear Communication Index*
https://www.cdc.gov/ccindex/

Source: USDHHS, Centers for Disease Control and Prevention, Simply Put: A Guide for
Creating Easy to Understand Materials,
https://www.cdc.gov/healthliteracy/pdf/simply_put.pdf